TMA Uniform Business Office

ICD-9-CM 2007 Updates for Outpatient Professional Services

Lt Col Jeanne Yoder
Lorrie Borchert, CPC, CPAT

26 September 2006 at 0600 EDT, 0900 EDT, 1100 EDT
27 September 2006 at 1430 EDT
28 September 2006 at 0600 EDT, 0900 EDT, 1100, 1430

Dial in number: 866-866-2244 (participant code: 5260345)

Overview

- Review 2007 revised ICD-9-CM codes
- Discuss 2007 new ICD-9-CM codes
- Discuss 2007 deleted ICD-9-CM codes
- Discuss how to use pivot table so each base will know exactly which codes have changed that they used in 2006

Objectives

- Given list of revised codes, identify those with the most impact at your facility and know what to do about it.
- Given a list of deleted codes, select actions that should be taken.
- Given a list of new codes, select those clinics/personnel who need to be notified.

How this flows

- Big Impacts
- Medium Stuff
- Who Cares

Big Impacts

- Probably on super bills, templates or cheat sheets
- Used lots and lots and lots in OUTPATIENT professional coding
- You need to do something regarding these codes

Big Impact Changes

- Pain
- Post Nasal Drip
- Hearing
- V58.3 – Attention to Surgical Dressings

New Category for Pain, NEC (338)

- Mostly were coded previously in the 780s, pain
- Important for surgical specialties, pediatrics and family practice clinic
- The category **excludes** generalized pain (780.96) and pain exclusively attributed to psychological factors (307.80)

All New Category for Pain, NEC (338)

338 Pain

- 338.0 - Central pain syndrome
  338.1 - Acute pain (need 5th digit)
- 338.11 – Acute pain due to trauma
- 338.12 – Acute post-thoracotomy pain
- 338.18 – Other acute postoperative pain
- 338.19 – Other acute pain
  338.2 - Chronic pain (need 5th digit)
- 338.21 – Chronic pain due to trauma
- 338.22 – Chronic post-thoracotomy pain
- 338.28 – Other chronic postoperative pain
- 338.29 – Other chronic pain
- 338.3 - Neoplasm related pain (acute) (chronic)
- 338.4 - Chronic pain syndrome

Deleted/Revised Codes – Head and Neck

- Tell family practice, and ENT providers
- Was 784.9 – Other symptoms involving head and neck – this code now requires a 5th digit

- 784.91 – Postnasal drip
- 784.99 – Other symptoms involving head and neck

Revised Code for Hearing Loss

- Tell ENT and audiology that laterality has been added to sensorineural hearing loss
- Was 389.1 Sensorineural hearing loss had 5 subcategories. It has expanded so now it has 7 subcategories. The existing were revised (389.10, 389.11, 389.12, 389.14 and 389.18)

- 389.10 Sensorineural hearing loss, unspecified (not changed)
  389.11 Sensory hearing loss, bilateral
  389.12 Neural hearing loss, bilateral
  389.14 Central hearing loss, bilateral
  389.15 Sensorineural hearing loss, unilateral
  389.16 Sensorineural hearing loss, asymmetrical
  389.18 Sensorineural hearing loss of combined types, bilateral

Revised Code – For Hearing Exams

- Tell ENT, Audiology and Flight Medicine
- Was V72.1 – Examination of Ears and Hearing - this code now requires a 5th digit
- The new codes also has the same DoD extenders as V72.1

- V72.11 – Encounter for hearing examination following failed hearing screening
  - V72.11 1 Encounter for hearing examination following failed hearing screening, otoscopic exam done
  - V72.11 2 Encounter for hearing examination following failed hearing screening, otoscopic exam not performed
- V72.19 – Other examination of ears and hearing
  - V72.19 1 – Other examination of ears and hearing, otoscopic exam done
  - V72.19 2 – Other examination of ears and hearing, otoscopic exam not performed

Deleted/Revised Codes – Surgical Dressings

- Tell surgical specialties, and primary care (e.g, family practice, pediatrics, internal medicine)
- V58.3 – Attention to Surgical Dressings and Sutures – this code now requires a 5th digit

- V58.30 – Encounter for change or removal of **nonsurgical** wound dressing
- V58.31 – Encounter for change or removal of **surgical** wound dressing
- V58.32 – Encounter for removal of sutures

New Category For Conditions Complicating Pregnancy, Childbirth or Purpureum (649)

- Make sure you tell your obstetrical providers. Also let family practice and any other providers at your facility who follow pregnancies know. If a non-obstetrician is following a pregnancy, many of these conditions will cause the patient to be transferred to an obstetrician.

- The conditions include:
- 649.0x - Tobacco use (previously 648.4 mental health)
- 649.1x - Obesity (previously 648.9 other current)
- 649.2x - Bariatric surgery
- 649.3x - Coagulation defects (previously 648.9 other current)
- 649.4x - Epilepsy
- 649.5x - Spotting
- 649.6x - Uterine size date discrepancy
- V86 - new category for estrogen receptor status (code first the neoplasm of breast 174.00-174.9, 175.0-175.9)
- V86.0 – Estrogen receptor positive status (ER+)
- V86.1 – Estrogen receptor negative status (ER-)

New Category for Pediatric Body Mass Index (V85.5)

- Tell your pediatricians
- Prior V85 codes did not include pediatric
- V85.5 Body Mass Index, Pediatric (for use for persons age 2-20 years old).
- V85.51 Body Mass index, pediatric, less than 5th percentile for age
- V85.52 Body Mass index, pediatric, 5th percentile to less than 85th percentile for age
- V85.53 Body Mass index, pediatric, 85th percentile to less than 95th percentile for age
- V85.54 Body Mass index, pediatric, greater than or equal to 95th percentile for age

Medium Stuff

- Tell your radiology department
- Specific guidance on how to code mammographic calcification/calculus
- 793.89 Other abnormal findings on radiological examination of breast now specifically includes mammographic calcifications/calculus

- New 5th digits
- 793.9 – Nonspecific abnormal findings on radiological and other examinations of body structure, Other – now requires 5th digit
- 739.91 – Image test inconclusive due to excess body fat (note: use additional coded to identify Body Mass Index if known)
- 739.99 – Other nonspecific abnormal findings on radiological and other examination of body structure

New V Codes

Tell your gastrointestional and general surgeons

Was V18.5 Digestive Disorders, now requires 5th digit

Was V45.89 Other Postprocedural Status, now requires 5th digit

New V codes:

- V18.51 - Colonic Polyps
- V18.59 – Other Digestive Disorders
- V45.86 - Bariatric Surgery Status

New/Revised Codes

Who Cares??

Anemia & Epilepsy Revised

Anemia & Epilepsy

285.29 - changed the word “illness” to “disease”

Epilepsy – some minor changes, but not usually on super bills/templates, so just a note to your neurologist is fine -

345.4 - The code title changed from Partial epilepsy without impairment of consciousness to:

- localization-related (focal) (partial) epilepsy and epileptic syndromes **with complex** partial seizures

Epilepsy Language Revised

345.40 – Localization-related (focal) (partial) epilepsy and epileptic syndromes with **complex** partial seizures, **without** mention of intractable epilepsy

345.41 – Localization-related (focal) (partial) epilepsy and epileptic syndromes with **complex** partial seizures, **with** intractable epilepsy

Epilepsy Language Revised

- 345.51 – Localization-related (focal) (partial) epilepsy and epileptic syndromes with **simple** partial seizures, with intractable epilepsy
- 345.80 – Other forms of epilepsy and recurrent seizures, **without** mention of intractable epilepsy
- 345.81 – Other forms of epilepsy and recurrent seizures, **with** intractable epilepsy

New Codes - (280-289)

Let your Hematology Department know
288.0 Agranulocytosis - now needs 5th digit and is now

- 288.0 Neutropenia
  - 288.00 – Neutropenia, unspecified
  - 288.01 - Congenial Neutropenia
  - 288.02 – Cyclic Neutropenia
  - 288.03 – Drug Induced Neutropenia
  - 288.04 – Neutropenia due to Infection
  - 288.09 – Other Neutropenia
- 288.4 Hemophagocytic Syndromes (new 4th digit)
- 288.5 Decreased White Blood Cell Count (new 4th digit, which needs 5th digit)
- 288.50 Leukocytopenia, unspecified
- 288.51 Lymphocytopenia
- 288.59 Other Decreased White Blood Cell count
- 288.6 Elevated White Blood Cell Count (new 4th digit, which needs 5th digit)
  - 288.60 – Leukocytosis, unspecified
  - 288.61 – Lymphocytosis (symptomatic)
  - 288.62 – Leukemoid reaction
  - 288.63 – Monocytosis (symptomatic)
  - 288.64 – Plasmacytosis
  - 288.65 – Basophilia
  - 288.69 – Other elevated white blood cell count
- 289.5 Other Diseases of Spleen (added a new 5th digit)
  - 289.53 – Neutropenic splenomegaly
- 289.8 Other Specified Disease of Blood and Blood-Forming Organs (added a new 5th digit)
  - 289.83 - Myelofibrosis

New Codes

- Let your Urology providers know
- How to code symptoms of benign hypertrophy and benign localized hyperplasia of the prostate with urinary obstruction and other lower urinary tract symptoms (LUTS)

- Added to 5th digits to 788.6 Other Abnormality of Urination
- 788.64 – Urinary hesitancy
- 788.65 - Straining on urination

Code Changes

Affects Impatient Services

Adverse Effect 995.2 has 5th digits

- 995.2 – Unspecified adverse effect of drug, medicinal and biological substance – now has 5th digits
- 995.20 – Unspecified adverse effect of unspecified drug, medicinal and biological substance
- 995.21 – Arthus phenomenon
- 995.22 – Unspecified adverse effect of anesthesia
- 995.23 – Unspecified adverse effect of insulin
- 995.27 – Other drug allergy
- 995.29 - Unspecified adverse effect of other drug, medicinal and biological substance

Chronic Kidney Disease Revised

- Tell your Nephrology providers
- Revised fifth digit subclassifications for reporting hypertensive heart and chronic kidney disease (404 – and note the addition of the word “chronic” to the category descriptor)
- Without heart failure or chronic kidney disease and with chronic kidney disease stage I through stage IV, or unspecified Use additional code to identify the stage of chronic kidney disease (585.1-585.4, 585.9)
- With heart failure and with chronic kidney disease stage I through stage IV, or unspecified Use additional code to identify the stage of chronic kidney disease (585.1-585.4, 585.9)
- Without heart failure and with chronic kidney disease stage V or end stage renal disease Use additional code to identify the stage of chronic kidney disease (585.5, 585.6)
- With heart failure and chronic kidney disease stage V or end stage renal disease Use additional code to identify the stage of chronic kidney disease (585.5-585.6)

Revised/Modified Codes – Diseases of Blood and Blood Forming Organs (280-289)

2006	2007
288.4 – was decreased white blood cell count	288.4 - now is hemophagocytic syndrome
288.50 – was leukocytosis, unspecified	288.50 - now is Leukocytopenia, unspecified
288.51 – was lymphecytosis (symptomatic)	288.51 - now is Lymphocytopenia
288.59 – was other elevated leukocytes	288.59 - now is other decreased white blood cell count

Let your Hematology Department know

New Neonatal Codes

These will be coded by inpatient coders who use coding books, so they will find them

New neonatal codes include these codes:

- 770.87 - Newborn respiratory arrest
- 770.88 - Hypoxemia of newborn
- 779.85 - Cardiac arrest of newborn

New Subcategory

- Tell your orthopedic providers

- 729.7 - A new subcategory for nontraumatic compartment syndrome
- 729.71 Nontraumatic compartment syndrome of upper extremity
- 729.72 Nontraumatic compartment syndrome of lower extremity
- 729.73 Nontraumatic compartment syndrome of the abdomen
- 729.79 Nontraumatic compartment syndrome of other sites

- 731.3 - New code for major osseous defects

New Codes

- Let your oncology providers know

- **538 – New code for gastrointestinal mucositis (ulcerative)**
- **Note – use an additional E code to identify adverse effects of therapy**

Deleted/Revised Codes - Lymphatic

Tell your Hematology Dept

238.7 – Other lymphatic and hematopoietic tissues (MHS had 3,735 cases in 2006) – now requires a fifth digit

Now use:

238.71 – Essential thrombocythemia

238.72 – Low grade myelodysplastic syndrome lesions

238.73 – High grade myelodysplastic syndrome lesions

238.74 – Myelodysplastic syndrome with 5q deletion

238.75 – Myelodysplastic syndrome, unspecified

238.76 – Myelofibrosis with myeloid metaplasia

238.79 – Other lymphatic and hematopoietic tissues

New Codes

429.83 - A new code for Takotsubo syndrome Takotsubo syndrome (also called the broken heart syndrome) is a rare condition characterized by chest pain, electrocardiographic abnormalities

518.7 - A new code for transfusion related acute lung injury (TRALI)

New Codes

Dental Codes

New Dental Code Changes

Let your Dental Department know

- 521.06 - Dental caries pit and fissure
- 521.07 - dental caries of smooth surface
- 521.08 - dental caries of root surface
- 521.81 - cracked teeth
- 523.30-523.32 - acute and chronic forms of gingivitis (both plaque and non-plaque induced), aggressive periodontitis
- 523.40-523.42) - chronic periodontitis
- 525.67 - code noting failed or faulty restoration efforts (e.g., poor aesthetics of existing restoration)

Dental

- 523.1 – Chronic gingivitis – now requires a fifth digit –Now use:
- 523.10 – chronic gingivitis, plaque induced
- 523.11 – chronic gingivitis, non-plaque induced

Dental

- 523.3 – Acute Periodontitis
- Note – Category name has changed to:
- 523.3 – Aggressive and acute periodontitis - now requires 5th digit
- 523.30 – Aggressive periodontitis, unspecified
- 523.31 – Aggressive periodontitis, localized
- 523.32 – Aggressive periodontitis, generalized
- 523.33 – Aggressive periodontitis

Objectives

- Given list of revised codes, identify those with the most impact at your facility and know what to do about it.
- Given a list of deleted codes, select actions that should be taken.
- Given a list of new codes, select those clinics/personnel who need to be notified.

Overview

- Review 2007 revised ICD-9-CM codes
- Discuss 2007 new ICD-9-CM codes
- Discuss 2007 deleted ICD-9-CM codes
- Discuss how to use pivot table so each base will know exactly which codes have changed that they used in 2006

Questions?